## **Chronic Disease Indicators: Indicator Definition**



## Sigmoidoscopy/colonoscopy among adults >= 50 years

Category: Cancer

Demographic Group: Resident persons aged >=50 years.

Numerator: Respondents aged >=50 years who report having had either a sigmoid oscopy or colonoscopy within

the previous 5 years.

Denominator: Respondents aged >=50 years who report ever having or never having either a sigmoidoscopy or

colonoscopy (excluding unknowns and refusals).

Measures of Frequency: Annual prevalence — crude and age-adjusted (standardized by the direct method to the year

2000 standard U.S. population, distribution 17\*) — with 95% confidence interval.

Time Period of Case

Definition:

Previous 5 years.

Background: In 2001, among adults aged >=50 years, 54% had never had a sigmoidoscopy. During 2001, cancer of

the colon and rectum caused approximately 56,700 deaths and was the second most common cause of cancer death. Approximately 148,000 new cases are diagnosed annually. The incidence of colon and

rectum cancer rises sharply after age 50 years.

Significance: Early detection with fecal occult blood testing and sigmoidoscopy/colonoscopy, treatment of

precancerous lesions, and treatment in the early stages of cancer decrease mortality from colon and

rectum cancer.

Limitations of Indicator: A lack of scientific and clinical consensus exists concerning the choice of screening and surveillance

tests, the appropriate screening and surveillance intervals, and the cost-effectiveness of screening.

Data Resources: Behavioral Risk Factor Surveillance Survey (BRFSS).

http://statecancerprofiles.cancer.gov/

Limitations of Data

Resources:

As with all self-reported sample surveys, BRFSS data might be subject to systematic error resulting from noncoverage (e.g., lower telephone coverage among populations of low socioeconomic status),

nonresponse (e.g., refusal to participate in the survey or to answer specific questions), or

measurement (e.g., social desirability or recall bias).

Healthy People 2010

Objectives:

3-12: Increase the proportion of adults who receive a colorectal cancer screening examination.

(3-12b is specific for adults aged >=50 years who have ever received a sigmoidoscopy.)

<sup>\*</sup> See Klein RJ, Schoenborn CA. Age adjustment using the 2000 projected U.S. population. Hyattsville, MD: US Department of Health and Human Services, CDC, National Center for Health Statistics, 2001. Healthy people 2010 statistical notes, no. 20. <a href="http://www.cdc.gov/nchs/data/statnt/statnt/20.pdf">http://www.cdc.gov/nchs/data/statnt/statnt/20.pdf</a>